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SUBJECT: UNGASS: HIGH LEVEL AIDS ISSUES

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Summary

1. (SBU) In recent discussions (May 29) with The First Lady of Lesotho and Prime Minister Mosisili, we have learned their major concerns about combating HIV/AIDS in Lesotho. We have advised them that the U.S. Delegation will be led by First Lady Mrs. Laura Bush, and that a number of U.S. experts would be expected to participate as well. The major concern of the Head of State and his wife is that Lesotho still ranks No. 3 with the world's highest percentage rate of infection. They both focused on the need for human and material resources during this emergency and are particularly concerned about the degree of care and lack of sensitive service providers on the ground throughout the Mountain Kingdom. The First Lady stated that at many of these international conferences, governments will say "everything is going well" and therefore she plans to spend as much time as possible with the NGOs who can relate the actual circumstances that ordinary citizens face when they seek counseling and treatment. The leaders of Lesotho's delegation are looking forward to exchanges with representatives of other countries facing these problems as well as members of the U.S. delegation. They have both offered gracious thanks to the U.S. for the assertive and expansive efforts being made through PEPFAR as well as by U.S. universities and private institutions. End Summary.

The First Lady's Views

2. (SBU) Early on May 29, the Ambassador and First Lady had a lengthy discussion about the tragedy of hundreds of individuals lined up outside the main public hospital in Lesotho and the abusive treatment many of them have endured by clinicians, only to be informed that the one doctor who could treat them was not available. The Ambassador related a specific case to the First Lady of an individual who had waited in line since 5:00 AM only to receive this type of treatment and, further, to be told that her daughter, who was no longer able to stand, had to walk into the hospital to even be seen. The First Lady responded that she remained shocked at the lack of a sense of service by health care clinicians and providers not only in the capital of Maseru and other towns, but also in rural areas. She continued that even though institutions such as the Baylor Institute of Excellence and the Clinton Foundation have focused on pediatrics care, even some of these young patients had not always been treated by clerks with the human dignity they warranted. The Ambassador shared with the First Lady conversations with private doctors concerning this problem and also expressed her view that while a number of institutions have geared their programs

towards infants (which is understandable to save that generation), there seemed to be a clear lack of behavior change, prevention, care and treatment for the 18-40 age group.

¶3. (SBU) Mrs. Mosisili agreed that donors as well as local organizations, PVOs and NGOs need to direct their attention to this group of Basotho even though they may be at various stages of the HIV/AIDS disease. We reviewed with her the objectives of U.S. PEPFAR programs indicating that our contributions to Lesotho had tripled in the past year and a half and that we had been approached by additional private organizations as well as educational institutions who are interested in supporting the government's efforts. The Ambassador commended the First Lady, her husband the Prime Minister, religious and other leaders in Lesotho for their publicization on the HIV/AIDS problem and for their efforts to diminish the stigmatization and discrimination associated with this disease. Mrs. Mosisili thanked the Ambassador for the continuing work by USG agencies in this regard as well.

¶4. (SBU) Concerning the UNGASS, she said that she planned to talk as much as possible with NGO representatives even during the high level session because she felt the problems that needed to be addressed were problems on the ground; that government representatives would also say "everything is going well" when in fact the community based organizations would indicate the true state of affairs in local areas.

¶5. (SBU) The Ambassador took the opportunity to brief the First Lady on the work in progress concerning the possible Millennium Challenge Account (MCA) to include renovation of almost 100 clinics as well as potential reconstruction or construction of new hospitals once the Government of Lesotho (GOL) presented a final compact pending GOL Cabinet and U.S. MCC Board approval.

Prime Minister Echoes Spouse's Comments

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¶6. (SBU) In a later meeting (May 29) with Prime Minister Mosisili on a range of issues (septel), the Head of State was most engaged when discussing the issue of HIV/AIDS. He said he remained stunned in looking at a recent study showing Lesotho with the 3rd highest HIV/AIDS infection rate in the world. He remarked that this state of affairs could not continue and that he was committed to changing this situation whatever it took. In that regard, he discussed the enormous need for human and material resources. We responded that we had initiated capacity building programs within Lesotho and also felt strongly that we must work in partnership with Lesotho's health partners. In other words, if there are U.S. preceptors, clinicians such as doctors, residents, nurses and nurse practitioners, they must be on the ground side-by-side with Basotho health workers and service providers in both rural and urban districts; otherwise, sustainability would not be possible. The Prime Minister leapt on the term "sustainability" by saying that "this is absolutely necessary," otherwise, once the donor experts leave, there is no residual capability left behind to handle the still large numbers of AIDS patients in the country.

¶7. (SBU) The Ambassador discussed her continuing dialogue with all of the American partners to include not only USG personnel, but university, NGO and PVO representatives, to ensure collaboration with other development partners, support of the goals as set forth by the GOL and with the officials of the relevant ministries, notably the Ministry of Health. She referenced her regular meetings with the Minister of Health often on a one-on-one basis to deal with misperceptions of U.S. institutions and the importance of working within the cultural context of Lesotho to decrease the feminization of AIDS and to provide partnership training in such a manner that it would be both accepted and carried out on the ground within the context of Lesotho. The Prime Minister expressed his very deep gratitude to the Ambassador on a personal level for her own

efforts to make sure that the cross cultural aspects of handling this disease are recognized and are being dealt with given the perception that donors might be imposing their views rather than working hand-in-hand to effectively communicate their commitment to partnership. (We note that perception of diplomatic, ("guest workers", if you will), can be distorted simply because of strong western personalities who have the good of specific countries at heart, but do not convey that message in such a way that can be heard effectively by the host country population.)

¶8. (SBU) The Prime Minister welcomed the pending visit of Deputy Assistant Secretary Carol Thompson to Lesotho and agreed that her site visits and conversations with Basotho would enhance the excellent relationship that already exists between the Kingdom of Lesotho and the U.S.

Comment

¶9. (SBU) The Prime Minister seemed deeply interested in the materials that we presented to him on the UNGASS and told us that he had devoted a significant amount of time in studying documents he had obtained concerning this special session and felt that it was important for him to understand the international community's overall interest in the issues and its commitment through the Global Fund to which the U.S. is a major contributor. It was clear that he also appreciated the extensive personnel commitment that the USG has made in terms of technical advisors to assist Lesotho in its responses to the Global Fund. Without the expertise of official U.S. personnel, it is doubtful that Lesotho would be able to meet the stringent administrative requirements of various international funding sources. We should add that USG officers have been intensely involved with their UN and other counterparts in developing both papers and strategies to address the pandemic and to obtain the resources necessary immediately to solve this problem in the long term.

¶10. (SBU) The 2005 visit of Ambassador Tobias made a lasting impression upon the GOL and on all stakeholders. It served as a visible validation of the depth of the President's commitment to eradicate this pandemic and we expect that both the Prime Minister and First Lady will take the opportunity during the UNGASS to convey their gratitude for this assistance and to also indicate their realization that they, Basotho themselves, must learn as much as possible through U.S. programs about combating this disease in order to overcome it and ensure Lesotho's future as a nation.

¶11. (SBU) Post encourages the U.S. Delegation to interact not only with the leaders of the Lesotho delegation, but with other GOL members such as the Ministers of Foreign Affairs and Health and their staff who will also be involved. End Comment.
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